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1		MIDWIFE CERTIFICATIO	ON ACT
2		2004 GENERAL SESSION	N
3		STATE OF UTAH	
4		Sponsor: Jackie Biskup	ski
5 6 7	Eric K. Hutchings David Litvack Peggy Wallace	Don E. Bush J. Morgan Philpot Mike Thompson	Ty McCartney Glenn A. Donnelson
8			
9	LONG TITLE		
10	General Description:		
11	This bill modifies the	ne Occupations and Professions Code	e by enacting the Midwife
12	Certification Act and makes related changes to the Health Care Providers Immunity		Providers Immunity
13	from Liability Act.		
14	Highlighted Provisions:		
15	This bill:		
16	provides for cer	tification of Direct-entry midwives b	y the Division of Occupational
17	and Professional Licensing	;	
18	provides for def	initions relating to the practice of mi	dwives;
19	creates the Certification	fied Direct-entry Midwife Board and	l sets forth its membership and
20	duties;		
21	requires the divi	sion to establish a Certified Direct-e	ntry Midwife Formulary
22	Committee and a certified	Direct-entry midwife formulary to de	fine which
23	prescription drugs and devi	ces can be $\hat{\mathbf{H}}$ [prescribed] OBTAINE	$\mathbf{p} \hat{\mathbf{h}}$ and administered by certified
24	Direct-entry midwives and	to provide guidelines for their use;	
25	provides for dis	ciplinary action, including administra	ative penalties, against certified
26	Direct-entry midwives;		
27	defines and prov	vides penalties for unlawful and unpr	rofessional conduct;
28	sets standards for	or consultation, collaboration, referra	l, and transfer to or with other



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29	health care providers and sets standards for liability under those circumstances; and
30	 brings certified Direct-entry midwives within the scope of the Health Care
31	Providers Immunity From Liability Act.
32	Monies Appropriated in this Bill:
33	None
34	Other Special Clauses:
35	None
36	Utah Code Sections Affected:
37	AMENDS:
38	58-13-2, as last amended by Chapter 3, Laws of Utah 2003
39	58-13-3, as last amended by Chapter 207, Laws of Utah 2003
40	78-14-3, as last amended by Chapter 131, Laws of Utah 2002
41	ENACTS:
42	58-77-101 , Utah Code Annotated 1953
43	58-77-102 , Utah Code Annotated 1953
44	58-77-201 , Utah Code Annotated 1953
45	58-77-202 , Utah Code Annotated 1953
46	58-77-301 , Utah Code Annotated 1953
47	58-77-302 , Utah Code Annotated 1953
48	58-77-303 , Utah Code Annotated 1953
49	58-77-304 , Utah Code Annotated 1953
50	58-77-401 , Utah Code Annotated 1953
51	58-77-501 , Utah Code Annotated 1953
52	58-77-502 , Utah Code Annotated 1953
53	58-77-503 , Utah Code Annotated 1953
54	58-77-601 , Utah Code Annotated 1953
55	58-77-602 , Utah Code Annotated 1953
56	58-77-603 , Utah Code Annotated 1953
57 58	Be it enacted by the Legislature of the state of Utah:
59	Section 1. Section 58-13-2 is amended to read:

60	58-13-2. Emergency care rendered by licensee.
61	(1) A person licensed or certified under Title 58, Occupations and Professions, to
62	practice as any of the following health care professionals, who is under no legal duty to
63	respond, and who in good faith renders emergency care at the scene of an emergency
64	gratuitously and in good faith, is not liable for any civil damages as a result of any acts or
65	omissions by the person in rendering the emergency care:
66	(a) osteopathic physician;
67	(b) physician and surgeon;
68	(c) naturopathic physician;
69	(d) dentist or dental hygienist;
70	(e) chiropractic physician;
71	(f) physician assistant;
72	(g) optometrist;
73	(h) nurse licensed under Section 58-31b-301 or 58-31c-102;
74	(i) podiatrist;
75	(j) certified nurse midwife;
76	(k) respiratory therapist; [or]
77	(l) pharmacist, pharmacy technician, and pharmacy intern[-]; or
78	(m) Direct-entry midwife certified under Section 58-77-301.
79	(2) (a) This Subsection (2) applies to health care professionals:
80	(i) described in Subsection (1);
81	(ii) who are under no legal duty to respond to the circumstances described in
82	Subsection (2)(b);
83	(iii) who are acting within the scope of the health care professional's license, or within
84	the scope of practice as modified under Subsection 58-1-307(4); and
85	(iv) who are acting in good faith without compensation or remuneration as defined in
86	Subsection 58-13-3(2).
87	(b) A health care professional described in Subsection (2)(a) is not liable for any civil
88	damages as a result of any acts or omissions by the health care professional in rendering care as
89	a result of:
90	(i) implementation of measures to control the causes of epidemic and communicable

91 diseases and other conditions significantly affecting the public health or necessary to protect 92 the public health as set out in Title 26A, Chapter 1, Local Health Departments; 93 (ii) investigating and controlling suspected bioterrorism and disease as set out in Title 94 26, Chapter 23b, Detection of Public Health Emergencies Act; and 95 (iii) responding to a national, state, or local emergency, a public health emergency as 96 defined in Section 26-23b-102, or a declaration by the President of the United States or other 97 federal official requesting public health-related activities. 98 (3) The immunity in Subsection (2) is in addition to any immunity or protection in state 99 or federal law that may apply. 100 Section 2. Section **58-13-3** is amended to read: 101 58-13-3. Qualified immunity -- Health professionals -- Charity care. 102 (1) (a) (i) The Legislature finds many residents of this state do not receive medical care 103 and preventive health care because they lack health insurance or because of financial 104 difficulties or cost. 105 (ii) The Legislature also finds that many physicians, charity health care facilities, and 106 other health care professionals in this state would be willing to volunteer medical and allied 107 services without compensation if they were not subject to the high exposure of liability 108 connected with providing these services. 109 (b) The Legislature therefore declares that its intention in enacting this section is to encourage the provision of uncompensated volunteer charity health care in exchange for a 110 111 limitation on liability for the health care facilities and health care professionals who provide 112 those volunteer services. 113 (2) As used in this section: 114 (a) "Health care facility" means any clinic or hospital, church, or organization whose 115 primary purpose is to sponsor, promote, or organize uncompensated health care services for 116 people unable to pay for health care services. 117 (b) "Health care professional" means individuals licensed or certified under Title 58,

(c) "Remuneration or compensation":

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Occupations and Professions, as physicians and surgeons, osteopaths, podiatrists, optometrists,

chiropractors, dentists, dental hygienists, registered nurses, certified nurse midwives, [and]

other nurses licensed under Section 58-31b-301[7], and certified Direct-entry midwives.

(i) (A) means direct or indirect receipt of any payment by the physician and surgeon, health care facility, other health care professional, or organization, on behalf of the patient, including payment or reimbursement under medicare or medicaid, or under the state program for the medically indigent on behalf of the patient; and

- (B) compensation, salary, or reimbursement to the health care professional from any source for the health care professional's services or time in volunteering to provide uncompensated health care; and
- (ii) does not mean any grant or donation to the health care facility used to offset direct costs associated with providing the uncompensated health care such as medical supplies or drugs.
- (3) A health care professional who provides health care treatment at or on behalf of a health care facility is not liable in a medical malpractice action if:
- (a) the treatment was within the scope of the health care professional's license under this title;
- (b) neither the health care professional nor the health care facility received compensation or remuneration for the treatment;
- (c) the acts or omissions of the health care professional were not grossly negligent or willful and wanton; and
- (d) prior to rendering services, the health care professional disclosed in writing to the patient, or if a minor, to the patient's parent or legal guardian, that the health care professional is providing the services without receiving remuneration or compensation and that in exchange for receiving uncompensated health care, the patient consents to waive any right to sue for professional negligence except for acts or omissions which are grossly negligent or are willful and wanton.
- (4) A health care facility which sponsors, promotes, or organizes the uncompensated care is not liable in a medical malpractice action for acts and omissions if:
 - (a) the health care facility meets the requirements in Subsection (3)(b);
- (b) the acts and omissions of the health care facility were not grossly negligent or willful and wanton; and
- 151 (c) the health care facility has posted, in a conspicuous place, a notice that in 152 accordance with this section the health care facility is not liable for any civil damages for acts

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153	or omissions except for those acts or omissions that are grossly negligent or are willful and
154	wanton.
155	(5) Immunity from liability under this section does not extend to the use of general
156	anesthesia or care that requires an overnight stay in a general acute or specialty hospital
157	licensed under Title 26, Chapter 21, Health Care Facility Licensing and Inspection Act.
158	Section 3. Section 58-77-101 is enacted to read:
159	CHAPTER 77. MIDWIFE CERTIFICATION ACT
160	Part 1. General Provisions
161	<u>58-77-101.</u> Title.
162	This chapter is known as the "Midwife Certification Act."
163	Section 4. Section 58-77-102 is enacted to read:
164	<u>58-77-102.</u> Definitions.
165	In addition to the definitions in Section 58-1-102, as used in this chapter:
166	(1) "Board" means the Certified Direct-entry Midwife Board created in Section
167	<u>58-77-201.</u>
168	(2) "Certified Direct-entry midwife" means a person certified under this chapter.
169	(3) "Client" means a woman under the care of a midwife and her fetus or newborn.
170	(4) "Midwife" means an individual who is engaging in the practice of midwifery.
171	(5) "Physician" means an individual licensed as a physician and surgeon, osteopathic
172	physician, or naturopathic physician.
173	(6) "Practice of midwifery" means practice that is in accordance with national
174	professional midwifery standards and that is based upon the acquisition of clinical skills
175	necessary for the care of essentially normal pregnant women and newborns, including
176	antepartum, intrapartum, postpartum, newborn, and limited interconceptual care and includes:
177	(a) obtaining an informed consent to provide services;
178	(b) obtaining a health history including a physical examination;
179	(c) developing a plan of care for a client;
180	(d) evaluating the results of client care;
181	(e) consulting and collaborating with and referring and transferring care to licensed
182	health care professionals as is appropriate regarding the care of a client;
183	(f) obtaining medications, as specified in this Subsection (6)(f) or by rule, to administer

184	to clients, including:
185	(i) prescription vitamins;
186	(ii) Rho D immunolglobulin;
187	(iii) CDC- or ACOG-recommended agents for Group B strep prophylaxis;
188	(iv) sterile water;
189	(v) IV fluids, excluding blood products;
190	(vi) oxytocin (Pitocin) or methlergonvine maleate (Methergine) for use postpartum
191	only;
192	(vii) oxygen;
193	(viii) local anesthetics for suturing an episiotomy or natural lacerations;
194	(ix) vitamin K to prevent hemorrhagic disease of the newborn;
195	(x) eye prophylaxis to prevent opthalmia neonatorum as required by law; and
196	(xi) other medications that are not controlled substances as defined in Section 58-37-2
197	and which are approved by the division in collaboration with the Certified Direct-entry
198	Midwife Formulary Committee;
199	(g) obtaining food, food extracts, dietary supplements as defined by the Federal Food,
200	Drug, and Cosmetic Act, homeopathic remedies, plant substances that are not designated as
201	prescription drugs or controlled substances, and over-the-counter medications to administer to
202	clients;
203	(h) obtaining and using appropriate equipment and devices such as Doppler, fetal
204	monitor, blood pressure cuff, phlebotomy supplies, instruments, and sutures;
205	(i) obtaining appropriate screening and testing, including laboratory tests, urinalysis,
206	and ultrasound;
207	(j) managing the antepartum period;
208	(k) managing the intrapartum period including:
209	(i) monitoring and evaluating the condition of mother and fetus;
210	(ii) performing emergency episiotomy; and
211	(iii) delivering in any out-of-hospital setting;
212	(l) managing the postpartum period including:
213	(i) suturing of episiotomy or first and second degree natural perineal and labial
214	lacerations, including the administration of a local anesthetic; and

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215	(ii) managing hemorrhage, including the administration of Pitocin, Methergine, or IV
216	fluids;
217	(m) managing the newborn period including:
218	(i) providing care for the newborn, including performing a normal newborn
219	examination; and
220	(ii) resuscitating a newborn;
221	(n) providing the following limited interconceptual services:
222	(i) breastfeeding support and counseling;
223	(ii) family planning, limited to natural family planning, cervical caps and diaphragms;
224	<u>and</u>
225	(iii) pap smears, where all abnormal results are to be referred to a physician; and
226	(o) executing the orders of a licensed health care professional, only within the
227	education, knowledge, and skill of the midwife. Ĥ THE PRACTICE OF MIDWIFERY IS NOT
227a	CONSIDERED THE PRACTICE OF MEDICINE. ${f \hat{h}}$
228	(7) "Unlawful conduct" is as defined in Sections 58-1-501 and 58-77-501.
229	(8) "Unprofessional conduct" is as defined in Sections 58-1-501 and 58-77-502 and as
230	may be further defined by rule.
231	Section 5. Section 58-77-201 is enacted to read:
232	Part 2. Board
233	<u>58-77-201.</u> Board.
234	(1) There is created the Certified Direct-entry Midwife Board consisting of four
235	certified Direct-entry midwives and one member of the general public.
236	(2) The board shall be appointed and serve in accordance with Section 58-1-201.
237	(3) (a) The duties and responsibilities of the board shall be in accordance with Sections
238	58-1-202 and 58-1-203.
239	(b) The board shall designate one of its members on a permanent or rotating basis to:
240	(i) assist the division in reviewing complaints concerning the unlawful or
241	unprofessional conduct of a certified Direct-entry midwife; and
242	(ii) advise the division in its investigation of these complaints.
243	(4) A board member who has, under Subsection (3), reviewed a complaint or advised
244	in its investigation may be disqualified from participating with the board when the board serves
245	as a presiding officer in an adjudicative proceeding concerning the complaint.

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246	(5) Faculty, board members, and other staff of Direct-entry midwifery learning
247	institutions may serve on the board.
248	Section 6. Section 58-77-202 is enacted to read:
249	58-77-202. Certified Direct-entry Midwife Formulary Committee Adoption of
250	certified Direct-entry midwife formulary.
251	(1) The division shall establish a Certified Direct-entry Midwife Formulary Committee
252	under Subsection 58-1-203(1)(f) to make recommendations to the board and the division
253	regarding the certified Direct-entry midwife formulary, including recommendations on which
254	additional prescription drugs and devices are appropriate for the scope of practice of certified
255	Direct-entry midwives and guidelines for their use.
256	(2) The committee shall consist of five members as follows:
257	(a) two certified Direct-entry midwives;
258	(b) one licensed physician who has recent, within five years, professional experience
259	consulting for and collaborating with Direct-entry midwives;
260	(c) one certified nurse midwife who has recent, within five years, professional
261	experience consulting for and collaborating with Direct-entry midwives; and
262	(d) one licensed pharmacist.
263	(3) The committee members shall:
264	(a) be appointed by the director of the division; and
265	(b) serve without compensation, travel costs, or per diem for their services.
266	(4) In accordance with Title 63, Chapter 46a, Utah Administrative Rulemaking Act, the
267	division shall adopt by rule a certified Direct-entry midwife formulary which includes:
268	(a) those additional prescription drugs or devices which may be obtained and
269	administered by certified Direct-entry midwives as defined in Subsection 58-77-102(6)(f)(xi);
270	<u>and</u>
271	(b) standards, conditions, and guidelines for use of the prescription drugs or devices
272	included in the formulary.
273	Section 7. Section 58-77-301 is enacted to read:
274	Part 3. Certification
275	58-77-301. Certification classification.
276	The division shall issue to a person who qualifies under this chapter a certification as a

Part 4. Certification Denial and Discipline
Section 11. Section 58-77-401 is enacted to read:
under this chapter.
deliver their baby where, when, how, and with whom they choose, regardless of certification
Nothing in this chapter abridges, limits, or changes in any way the right of parents to
<u>58-77-304.</u> Parents' rights.
Section 10. Section 58-77-304 is enacted to read:
compliance with the requirements of Section 58-77-302.
(3) At the time of renewal, the certified Direct-entry midwife shall be in current
certification unless the individual renews it in accordance with Section 58-1-308.
(2) Each certification automatically expires on the expiration date shown on the
to stagger the renewal cycles it administers.
(b) The division may by rule extend or shorten a renewal period by as much as one year
a two-year renewal cycle established by rule.
(1) (a) The division shall issue each certification under this chapter in accordance with
58-77-303. Term of certification Expiration Renewal.
Section 9. Section 58-77-303 is enacted to read:
course as defined by division rule.
(6) provide documentation of successful completion of an approved pharmacology
an organization approved by the division in collaboration with the board; and
(5) hold current adult and infant CPR and newborn resuscitation certifications through
collaboration with the board;
American Registry of Midwives or equivalent certification approved by the division in
(3) be of good moral character;(4) hold a Certified Professional Midwife certificate in good standing with the North
(2) pay a fee as determined by the department under Section 63-38-3.2;
(1) submit an application in a form prescribed by the division;
Each applicant for certification as a certified Direct-entry midwife shall:
58-77-302. Qualifications for certification.
Section 8. Section 58-77-302 is enacted to read:
certified Direct-entry midwife.

308	58-77-401. Grounds for denial of certification Disciplinary proceedings.
309	Grounds for refusing to issue a certification to an applicant, for refusing to renew the
310	certification, for revoking, suspending, restricting, or placing on probation the certification, for
311	issuing a public or private reprimand, and for issuing a cease and desist order shall be in
312	accordance with Section 58-1-401.
313	Section 12. Section 58-77-501 is enacted to read:
314	Part 5. Unlawful and Unprofessional Conduct Penalties
315	<u>58-77-501.</u> Unlawful conduct.
316	Ĥ (1) h In addition to the definition in Subsection 58-1-501(1), "unlawful conduct" includes:
317	$\hat{\mathbf{H}}$ [1] (a) $\hat{\mathbf{h}}$ representing or holding oneself out as a certified Direct-entry midwife when no
318	certified under this chapter; and
319	$\hat{\mathbf{H}}$ [$\frac{(2)}{(2)}$] (b) $\hat{\mathbf{h}}$ using prescription medications, except oxygen, while engaged in the practice of
320	midwifery when not certified under this chapter.
320a	\hat{H} (2) EXCEPT AS PROVIDED IN SUBSECTIONS (1)(A) AND (B), IT IS LAWFUL TO PRACTICE
320b	MIDWIFERY IN THIS STATE WITHOUT BEING CERTIFIED UNDER THIS CHAPTER. $\hat{\mathbf{h}}$
321	Section 13. Section 58-77-502 is enacted to read:
322	58-77-502. Unprofessional conduct.
323	In addition to the definition in Subsection 58-1-501(2), "unprofessional conduct"
324	includes:
325	(1) engaging in any act or practice for which the certified Direct-entry midwife is not
326	competent:
327	(2) failing to obtain informed consent as described in Subsection 58-77-601(1);
328	(3) disregarding a client's dignity or right to privacy as to her person, condition,
329	possessions, or medical record;
330	(4) failing to file or record any medical report as required by law, impeding, or
331	obstructing the filing or recording of such a report, or inducing another to fail to file or record
332	such a report;
333	(5) breaching a statutory, common law, regulatory, or ethical requirement of
334	confidentiality with respect to a person who is a client, unless ordered by the court;
335	(6) inappropriately delegating midwifery duties;
336	(7) using advertising or an identification statement that is false, misleading, or
337	deceptive;
338	(8) using in combination with the term "midwife" the term "nurse" or another title,

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339	initial, or designation that falsely implies that the midwife is licensed as a certified nurse
340	midwife, registered nurse, or licensed practical nurse; and
341	(9) submitting a birth certificate known by the person to be false or fraudulent.
342	Section 14. Section 58-77-503 is enacted to read:
343	58-77-503. Penalty for unlawful conduct.
344	A person who violates the unlawful conduct provisions defined in this chapter is guilty
345	of a class A misdemeanor.
346	Section 15. Section 58-77-601 is enacted to read:
347	Part 6. Standards of Practice
348	58-77-601. Standards of practice.
349	(1) (a) Prior to providing any services, a certified Direct-entry midwife must obtain Â [an] A
349a	WRITTEN ĥ
350	informed consent from a client.
351	(b) The consent must include:
352	(i) the name and certificate number of the midwife;
353	(ii) the client's name, address, telephone number, and primary care provider, if the
354	client has one; $\hat{\mathbf{H}}$ [and]
354a	(iii) THE FACT, IF TRUE, THAT THE CERTIFIED DIRECT-ENTRY MIDWIFE IS
354b	NOT A CERTIFIED NURSE MIDWIFE OR A PHYSICIAN; Î
355	Ĥ [(iii)] (iv) h all sections required by the North American Registry of Midwives in its
355a	informed
356	consent guidelines Ĥ [:]:
356a	(v) WHETHER THE CERTIFIED DIRECT-ENTRY MIDWIFE IS COVERED BY A PROFESSIONAL
356b 356c	<u>LIABILITY INSURANCE POLICY; AND</u> (vi) THE FACT THAT THE CLIENT'S DECISION NOT TO USE A PHYSICIAN OR A CERTIFIED
356d	NURSE MIDWIFE MAY BE TAKEN INTO ACCOUNT IN A MALPRACTICE ACTION. Î
357	(2) (a) The certified Direct-entry midwife must recommend to the client that she be
358	evaluated by a physician or certified nurse midwife during the first trimester.
359	(b) If the client refuses, the certified Direct-entry midwife must document the refusal
360	and have the client sign another informed consent indicating the refusal to be evaluated by a
361	physician or certified nurse midwife.
362	(3) A certified Direct-entry midwife shall appropriately consult with, collaborate with,
363	refer to, or recommend that a client transfer care to a licensed health care professional when the
364	circumstances require that action in accordance with standards established by division rule.
365	(4) If after a client has been informed that she has or may have a high-risk condition
366	indicating the need for medical consultation, collaboration, referral, or transfer and the client
367	chooses to decline, then the certified Direct-entry midwife shall:
368	(a) continue to provide care for the client if the client signs a waiver of medical
369	consultation, collaboration, referral, or transfer; or

370	(b) terminate care in accordance with procedures established by division rule.
371	(5) If transfer of care results from an emergency situation, the certified Direct-entry
372	midwife shall initiate transfer by:
373	(a) calling 911 and reporting the need for immediate transfer:
374	(b) immediately transporting the client by private vehicle to the receiving provider; or
375	(c) contacting the physician to whom the client will be transferred and following that
376	physician's orders.
376a	$\hat{\mathbf{H}}$ (6) THIS CHAPTER DOES NOT MANDATE HEALTH INSURANCE COVERAGE FOR MIDWIFE
376b	SERVICES. În
377	Section 16. Section 58-77-602 is enacted to read:
378	58-77-602. Immunity and liability.
379	(1) If a midwife seeks to consult with, refer, or transfer a client to a physician, certified
380	nurse midwife, or facility, the responsibility of the provider or facility for the client does not
381	begin until the client is physically within the care of the provider or facility.
382	(2) A physician or certified nurse midwife who examines a client in accordance with
383	Subsection 58-77-601(2) is only liable for the actual examination and cannot be held
384	accountable for the client's decision to pursue an out-of-hospital birth or the services of a
385	midwife.
386	(3) (a) A physician or certified nurse midwife may, upon receiving a briefing Ĥ [data] h
386a	<u>from</u>
387	a midwife, issue a medical order for the midwife's client, without that client being an explicit
388	patient of the physician or certified nurse midwife.
389	(b) $\hat{\mathbf{H}}$ [The responsibility and liability for the briefing and the proper execution of the
390	medical order is that of the midwife.] A PROVIDER-PATIENT RELATIONSHIP MAY NOT ARISE FROM
390a	A PHYSICIAN OR CERTIFIED NURSE MIDWIFE PROVIDING MEDICAL ADVICE OR ISSUING A
390b	MEDICAL ORDER TO THE MIDWIFE FOR THE MIDWIFE'S CLIENT. (c) REGARDLESS OF THE ADVICE OR ORDER GIVEN, THE RESPONSIBILITY AND LIABILITY
390c 390d	FOR CARING FOR THE CLIENT RESTS WITH THE MIDWIFE. $\hat{\mathbf{h}}$
391	$\hat{\mathbf{H}}$ [(e)] (d) $\hat{\mathbf{h}}$ The provider giving the order is responsible and liable only for the
391a	appropriateness
392	of the order given the data received.
393	$\hat{\mathbf{H}}$ [(d)] (e) $\hat{\mathbf{h}}$ The issuing of an order for a midwife's client does not constitute a delegation of
394	duties from the other provider to the midwife.
395	Section 17. Section 58-77-603 is enacted to read:
396	58-77-603. Prohibited practices.
397	A midwife may not:
398	(1) administer a prescription drug to a client, other than those specified in Subsection
399	58-77-102(6);
400	(2) use forceps or a vacuum extractor, or effect any type of surgical delivery except for

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401	the cutting of an emergency episiotomy,
402	(3) administer any type of epidural, spinal, or caudal anesthetic, or any type of narcotic
403	analgesia; or
404	(4) induce abortion.
405	Section 18. Section 78-14-3 is amended to read:
406	78-14-3. Definitions.
407	As used in this chapter:
408	(1) "Audiologist" means a person licensed to practice audiology under Title 58,
409	Chapter 41, Speech-language Pathology and Audiology Licensing Act.
410	(2) "Certified Direct-entry midwife" means a person certified under the Midwife
411	Certification Act to practice midwifery as defined in Section 58-77-102.
412	[(2)] (3) "Certified social worker" means a person licensed to practice as a certified
413	social worker under Section [58-60-305] <u>58-60-205</u> .
414	[(3)] (4) "Chiropractic physician" means a person licensed to practice chiropractic
415	under Title 58, Chapter 73, Chiropractic Physician Practice Act.
416	[(4)] (5) "Clinical social worker" means a person licensed to practice as a clinical
417	social worker under Section [58-60-305] <u>58-60-205</u> .
418	[(5)] (6) "Commissioner" means the commissioner of insurance as provided in Section
419	31A-2-102.
420	[(6)] (7) "Dental hygienist" means a person licensed to practice dental hygiene as
421	defined in Section 58-69-102.
422	[(7)] (8) "Dentist" means a person licensed to practice dentistry as defined in Section
423	58-69-102.
424	[(8)] (9) "Division" means the Division of Occupational and Professional Licensing
425	created in Section 58-1-103.
426	[(9)] (10) "Future damages" includes damages for future medical treatment, care or
427	custody, loss of future earnings, loss of bodily function, or future pain and suffering of the
428	judgment creditor.
429	[(10)] (11) "Health care" means any act or treatment performed or furnished, or which
430	should have been performed or furnished, by any health care provider for, to, or on behalf of a
431	patient during the patient's medical care, treatment, or confinement.

[(11)] (12) "Health care facility" means general acute hospitals, specialty hospitals, home health agencies, hospices, nursing care facilities, assisted living facilities, birthing centers, ambulatory surgical facilities, small health care facilities, health care facilities owned or operated by health maintenance organizations, and end stage renal disease facilities.

[(12)] (13) "Health care provider" includes any person, partnership, association, corporation, or other facility or institution who causes to be rendered or who renders health care or professional services as a hospital, health care facility, physician, registered nurse, licensed practical nurse, nurse midwife, certified Direct-entry midwife, dentist, dental hygienist, optometrist, clinical laboratory technologist, pharmacist, physical therapist, podiatric physician, psychologist, chiropractic physician, naturopathic physician, osteopathic physician and surgeon, audiologist, speech-language pathologist, clinical social worker, certified social worker, social service worker, marriage and family counselor, practitioner of obstetrics, or others rendering similar care and services relating to or arising out of the health needs of persons or groups of persons and officers, employees, or agents of any of the above acting in the course and scope of their employment.

[(13)] (14) "Hospital" means a public or private institution licensed under Title 26, Chapter 21, Health Care Facility Licensing and Inspection Act.

[(14)] (15) "Licensed practical nurse" means a person licensed to practice as a licensed practical nurse as provided in Section 58-31b-301.

[(15)] (16) "Malpractice action against a health care provider" means any action against a health care provider, whether in contract, tort, breach of warranty, wrongful death, or otherwise, based upon alleged personal injuries relating to or arising out of health care rendered or which should have been rendered by the health care provider.

[(16)] (17) "Marriage and family therapist" means a person licensed to practice as a marriage therapist or family therapist under Section 58-60-405 and Section 58-60-305.

[(17)] (18) "Naturopathic physician" means a person licensed to practice naturopathy as defined in Section 58-71-102.

[(18)] (19) "Nurse[=] midwife" means a person licensed to engage in practice as a nurse midwife under Section 58-44a-301.

[(19)] (20) "Optometrist" means a person licensed to practice optometry under Title 58, Chapter 16a, Utah Optometry Practice Act.

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463 [(20)] (21) "Osteopathic physician" means a person licensed to practice osteopathy 464 under Title 58, Chapter 68, Utah Osteopathic Medical Practice Act. 465 [(21)] (22) "Patient" means a person who is under the care of a health care provider, 466 under a contract, express or implied. 467 [(22)] (23) "Pharmacist" means a person licensed to practice pharmacy as provided in 468 Section 58-17a-301. 469 [(23)] (24) "Physical therapist" means a person licensed to practice physical therapy 470 under Title 58, Chapter 24a, Physical Therapist Practice Act. 471 [(24)] (25) "Physician" means a person licensed to practice medicine and surgery under 472 Title 58, Chapter 67, Utah Medical Practice Act. 473 [(25)] (26) "Podiatric physician" means a person licensed to practice podiatry under 474 Title 58, Chapter 5a, Podiatric Physician Licensing Act. 475 [(26)] (27) "Practitioner of obstetrics" means a person licensed to practice as a 476 physician in this state under Title 58, Chapter 67, Utah Medical Practice Act, or under Title 58, 477 Chapter 68, Utah Osteopathic Medical Practice Act. 478 [(27)] (28) "Psychologist" means a person licensed under Title 58, Chapter 61, 479 Psychologist Licensing Act, to practice psychology as defined in Section 58-61-102. 480 [(28)] (29) "Registered nurse" means a person licensed to practice professional nursing 481 as provided in Section 58-31b-301. 482 [(29)] (30) "Representative" means the spouse, parent, guardian, trustee, 483 attorney-in-fact, or other legal agent of the patient. 484 [(30)] (31) "Social service worker" means a person licensed to practice as a social 485 service worker under Section 58-60-205. 486 [(31)] (32) "Speech-language pathologist" means a person licensed to practice speech-language pathology under Title 58, Chapter 41, Speech-language Pathology and 487 488 Audiology Licensing Act.

[(32)] (33) "Tort" means any legal wrong, breach of duty, or negligent or unlawful act

or omission proximately causing injury or damage to another.

Legislative Review Note as of 1-13-04 9:28 AM

A limited legal review of this legislation raises no obvious constitutional or statutory concerns.

Office of Legislative Research and General Counsel

Fiscal Note	Midwife Certification Act	27-Jan-04
Bill Number HB0227		10:43 AM

State Impact

Board meeting will cost \$1,200 and the program will increase revenues to the Commerce Service Fund by \$1,500.

	FY 2005 Approp.	FY 2006 Approp.	FY 2005 Revenue	FY 2006 Revenue
Commerce Service Fund	\$1,200	\$1,200	\$1,500	\$1,500
TOTAL	\$1,200	\$1,200	\$1,500	\$1,500

Individual and Business Impact

Business and individual impacts are expected to be small.

Office of the Legislative Fiscal Analyst